

APPLICATION DATA SHEET

Application Information

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: CONTROL OF STERILIZATION DEVICE AND
METHOD

Attorney Docket Number:: 027651-266

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 2

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Sweden

Status:: Full Capacity

Given Name:: Hakan

Middle Name::

Family Name:: MOLLER

Name Suffix::

City of Residence:: Lund

State or Province of Residence::

Country of Residence:: Sweden

Street of Mailing Address:: Skolgatan 4

City of Mailing Address:: Lund

State or Province of Mailing
Address::

Country of Mailing Address:: Sweden

Postal or Zip Code of Mailing
Address:: SE-223 61

Applicant Authority Type::	Inventor
Primary Citizenship Country::	United Kingdom
Status::	Full Capacity
Given Name::	Laurence
Middle Name::	
Family Name::	MOTT
Name Suffix::	
City of Residence::	Trelleborg
State or Province of Residence::	
Country of Residence::	Sweden
Street of Mailing Address::	Flundrevagen 8
City of Mailing Address::	Trelleborg
State or Province of Mailing Address::	
Country of Mailing Address::	Sweden
Postal or Zip Code of Mailing Address::	SE-231 92
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Sweden
Status::	Full Capacity
Given Name::	Lars
Middle Name::	
Family Name::	MARTENSSON
Name Suffix::	

City of Residence:: Veberod
State or Province of Residence::
Country of Residence:: Sweden
Street of Mailing Address:: Vallmovagen 4
City of Mailing Address:: Veberod
State or Province of Mailing Address::
Country of Mailing Address:: Sweden
Postal or Zip Code of Mailing Address:: SE-240 14

Correspondence Information

Correspondence Customer Number:: 21839
Phone Number:: (703) 836-6620
Fax Number: (703) 836-2021

Representative Information

Representative Customer Number:: 21839

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/SE2003/001791	11/19/03

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
Sweden	0203693-7	12/13/02	Yes

Assignee Information

Assignee Name::	TETRA LAVAL HOLDINGS & FINANCE S.A.
Street of Mailing Address::	Av. General-Guisan 70
City of Mailing Address::	Pully
State or Province of Mailing Address::	
Country of Mailing Address::	Switzerland
Postal or Zip Code of Mailing Address::	CH-1009